



Patent Docket: Combined declaration and power of attorney (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP) As a below named inventor, I hereby declare that: type of declaration This declaration is of the following type: (check one applicable item below) original design supplemental Note: If the Declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application, do not check next item; check appropriate one of last three items. national stage of PCT Note: If one of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP. divisional continuation continuation-in-part (CIP) INVENTORSHIP IDENTIFICATION WARNING: If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted. My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed, and for which a patent is sought on the invention entitled: title of invention AN IMPLANT FOR AN OSTEOSYNTHESIS DEVICE, IN PARTICULAR FOR THE SPINE

SPECIFICATION IDENTIFICATION

the s	pecifica	ation of which: (complete (a), (b) or (c))
	(a)) is attached hereto.
	(b)) was filed on DECEMBER 14, 2001 as Serial No. 10/009 998 or Express Mail No. (as Serial No. not yet known) and was amended on (if applicable).
Note:	accor are ti	idments filed after the original papers are deposited with the PTO that contain new mutter are not reded a filing date by being referred to in the Declaration. Accordingly, the amendments involved those filed with the application papers or, in the case of a supplemental Declaration, are those dments claiming matter not encompassed in the original statement of invention or claims. See 37 1.67.
	(c)) was described and claimed in PCT International Application No. PCT/FR01/01644 filed on 14 June 2000 and as amended under PCT Article 19 on (if any).
	ACK	NOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR
		ate that I have reviewed and understand the contents of the above-identified n, including the claims, as amended by any amendment referred to above.
		lge the duty to disclose information, which is material to patentability as defined of Federal Regulations, § 1.56,
		(also check the following items, if desired)
		and which is material to the examination of this application, namely,
	_	information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and
		information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue

PRIORITY CLAIM (35 U.S.C. § 119(a)-(d))

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

	(comple	ete (d) or (c))				
(d) no such	applications have been	filed.				
(e) such app						
	is entered above and the i check item (e), enter the det				l the U.S. i	
(6 MC	REIGN/PCT APPLICA ONTHS FOR DESIGN) NY PRIORITY CLAIM	PRIOR TO	THIS APPLI	CATION	'HS	
COUNTRY (OR NDICATE IF PCT	APPLICATION NUMBER	1	OF FILING conth/year)	CLAIME	ORITY ED UNDER SC 119	
FRANCE	99 07 687	14 π	INE 1999	YES NO		
					ио 🗌	
	nefit under Title 35, U	.C. § 119(e))			
PROVISIO	PROVISIONAL APPLICATION NUMBER			FILING DATE		
FROVISIO				•		

Note: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120.

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (list name and registration number).

Thomas F. Peterson, <u>24790</u>; Richard J. Streit, <u>25765</u>; Donald P. Reynolds, <u>26220</u>; W. Dennis Drehkoff, <u>27193</u>; Vangelis Economou, <u>3234</u>1; Brian W. Hameder, <u>45613</u>; Valerie Neymeyer-Tynkov, <u>46956</u>; Paul B. West, <u>1894</u>7; Joseph H. Handelman, <u>26179</u>; Peter D. Galloway <u>27885</u>; John Richards, <u>31503</u>; Iain C. Baillie, <u>24090</u>; Richard P. Berg, <u>28145</u>

Attached, as pa	art of this declar	ation	and pow	er of	attorney,	is the authoriz	ation o	f the
 above-named	practitioner(s)	to	accept	and	follow	instructions	from	my
representative((s).							

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO:

(Name and telephone number)

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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Note: Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.

Full 1	name	of:	solė	or:	first	invent	tor
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Olivier	BERVARD	CARLY CARLI
(Given Name)	(Middle Inital or Name)	(Family (or Last) Name)
Inventor's signature_		
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